

10/689463

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number

01840-001-US-01

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| | | |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS | 47 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 47 minus 20 = | 27 |
| INDEPENDENT CLAIMS | 2 minus 3 = | 0 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE OTHER THAN
OR SMALL ENTITY

| | | | |
|-----------|--------|--------------|--------|
| RATE | FEES | RATE | FEES |
| BASIC FEE | 385.00 | OR BASIC FEE | 770.00 |
| XS 9= | | OR XS18= | 486 |
| X43= | | OR X86= | — |
| +145= | | OR +290= | — |
| TOTAL | | OR TOTAL | 1256 |

CLAIMS AS AMENDED - PART II

| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | (Column 1) | (Column 2) | (Column 3) |
|--|-------------|---|-------|---|------------------|------------|------------|------------|
| | | | | | | | | |
| | Total | • 20 | Minus | ** 47 | = 6 | | | |
| | Independent | • 1 | Minus | *** 3 | = 0 | | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | <input type="checkbox"/> | | | | | | |

SMALL ENTITY
OTHER THAN
OR SMALL ENTITY

| | | | |
|---------------------|------------------------|------------------------|------------------------|
| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
| XS 9= | | XS18= | |
| X43= | | X86= | |
| +145= | | +290= | |
| TOTAL ADDIT. FEE | | OR TOTAL ADDIT. FEE | 0 |

| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | (Column 1) | (Column 2) | (Column 3) |
|--|-------------|---|-------|---|------------------|------------|------------|------------|
| | | | | | | | | |
| | Total | • 19 | Minus | ** 47 | = 0 | | | |
| | Independent | • 1 | Minus | *** 3 | = 0 | | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | <input type="checkbox"/> | | | | | | |

| | | | |
|---------------------|------------------------|------------------------|------------------------|
| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
| XS 9= | | XS18= | |
| X43= | | X86= | |
| +145= | | +290= | |
| TOTAL ADDIT. FEE | | OR TOTAL ADDIT. FEE | 0 |

| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | (Column 1) | (Column 2) | (Column 3) |
|--|-------------|---|-------|---|------------------|------------|------------|------------|
| | | | | | | | | |
| | Total | • | Minus | = | = | | | |
| | Independent | • | Minus | *** | = | | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | <input type="checkbox"/> | | | | | | |

| | | | |
|---------------------|------------------------|------------------------|------------------------|
| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
| XS 9= | | XS18= | |
| X43= | | X86= | |
| +145= | | +290= | |
| TOTAL ADDIT. FEE | | OR TOTAL ADDIT. FEE | 0 |

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.